

## APPLICATION DATA SHEET

### **Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

CD-ROM or CD-R?:: None

Number of CD Disks:: 0

Number of Copies of CDs:: 0

Sequence Submission?:: No

Computer Readable Form (CRF)?:: No

Number of Copies of CRF:: 0

Title:: METHOD AND DEVICE FOR MEASURING  
MULTIPLE PHYSIOLOGICAL PROPERTIES OF  
CELLS

Attorney Docket Number:: THI-002

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 8

Small Entity?:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Jay

Middle Name:: S.

Family Name:: Teich  
Name Suffix::  
City of Residence:: Weston  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 64 Webster Road  
City of Mailing Address:: Weston  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 02493

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Andy  
Middle Name:: C.  
Family Name:: Neilson  
Name Suffix::

City of Residence:: Groton  
State or Province of Residence:: MA  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 532 Chicopee Row  
City of Mailing Address:: Groton  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 01450

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: R.  
Family Name:: Sweeney

Name Suffix::

City of Residence:: Pelham

State or Province of Residence:: NH

Country of Residence:: U.S.A.

Street of Mailing Address:: 50 Longview Circle

City of Mailing Address:: Pelham

State or Province of Mailing Address:: NH

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 03076

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Geoff

Middle Name::

Family Name:: Uhl

Name Suffix::

City of Residence:: Cambridge

State or Province of Residence:: MA

Country of Residence:: U.S.A.

Street of Mailing Address:: 61 Aberdeen Avenue

City of Mailing Address:: Cambridge

State or Province of Mailing Address:: MA

Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 02139

#### **Correspondence Information**

Correspondence Customer Number:: 021323

#### **Representative Information**

Representative Customer Number:: 021323

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional of	60/502,417	09/10/2003

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

**Assignee Information**

Assignee Name:: Thermogenic Imaging  
City of Mailing Address:: Billerica  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: U.S.A.